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121903

16569 U.S. PTO

PTO/SB/05 (08-03)
 Approved for use through 07/31/2006. OMB 0651-0032
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 03-100
 First Inventor RAPHAEL SCHLANGER
 Title VEHICLE WHEEL
 Express Mail Label No. ER321883168 US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Mail Stop Patent Application
 Commissioner for Patents
 P.O. Box 1450
 Alexandria VA 22313-1450

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
 (Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.
 See 37 CFR 1.27.
3. ☒ Specification [Total Pages 34]
 (preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table,
 or a computer program listing appendix
 - Background of the invention
 - Brief Summary of the invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 22]
5. Oath or Declaration [Total Sheets 2]
 a. ☒ Newly executed (original or copy)
 b. ☐ Copy from a prior application (37 CFR 1.63(d))
 (for continuation/divisional with Box 18 completed)
 i. ☐ DELETION OF INVENTOR(S)
 Signed statement attached deleting inventor(s)
 name in the prior application, see 37 CFR
 1.83(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or
 Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
 (if applicable, all necessary)
 a. ☐ Computer Readable Form (CRF)
 b. Specification Sequence Listing on:
 i. ☐ CD-ROM or CD-R (2 copies); or
 ii. ☐ Paper
 c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of
 (when there is an assignee) Attorney
11. ☐ English Translation Document (if applicable)
12. ☒ Information Disclosure ☒ Copies of IDS
 Statement (IDS)/PTO-1449 Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
 (Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
 (if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122
 (b)(2)(B)(i). Applicant must attach form PTO/SB/35
 or its equivalent.
17. ☐ Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.:

Prior application information:

Examiner:

Art Unit:

For CONTINUATION OF DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☐ Customer Number: OR ☒ Correspondence address below

Name RAPHAEL SCHLANGER
 Address 128 HULDA HILL ROAD
 City WILTON State CT Zip Code 06897
 Country U.S.A. Telephone 203-778-4711 Fax 203-798-8240

Name (Print/Type) RAPHAEL SCHLANGER Registration No. (Attorney/Agent) -----
 Signature *Raphael Schlanger* Date 12/19/03

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
 If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

19270 U.S. PTO
10/742127

121903

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FEE TRANSMITTAL

for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)**627**

Complete if Known

Application Number	
Filing Date	
First Named Inventor	RAPHAEL SCHLANGER
Examiner Name	
Art Unit	
Attorney Docket No.	03-100

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☐ Deposit Account:

Deposit Account Number:
 Deposit Account Name:
 Commissioner is authorized to: (check all that apply)
 Charge fee(s) indicated below ☐ Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee
 is above-identified deposit account.

FEE CALCULATION

BASIC FILING FEE

Entity	Small Entity	Fee	Fee	Fee Description	Fee Paid
(\$)	Code (\$)	Code (\$)			
750	2001	375		Utility filing fee	375
330	2002	165		Design filing fee	
520	2003	260		Plant filing fee	
750	2004	375		Reissue filing fee	
160	2005	80		Provisional filing fee	

SUBTOTAL (1) (\$)**375.00**

EXTRA CLAIM FEES FOR UTILITY AND REISSUE

1 Claims **48** -20** = **28** x **9** = **252.00**
 1 Independent **1** -3** = **-** x **-** = **-**
 1 Multiple Dependent **-** = **-** x **-** = **-**

Entity	Small Entity	Fee	Fee	Fee Description	Fee Paid
(\$)	Code (\$)	Code (\$)			
18	2202	9		Claims in excess of 20	
84	2201	42		Independent claims in excess of 3	
260	2203	140		Multiple dependent claim, if not paid	
64	2204	42		** Reissue independent claims over original patent	
18	2205	9		** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$)**627.00**

Number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity - Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920	1804	920	Requesting publication of SIR prior to Examiner action	
1805	1,840	1805	1,840	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(g)	
1808	180	1808	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(e))	
1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)**-----**

ATTACHED BY

(Print/Type) **RAPHAEL SCHLANGER**Registration No. **-----**

(Attorney/Agent)

(Complete if applicable)

Telephone **203-778-4711**Date **12/19/03**

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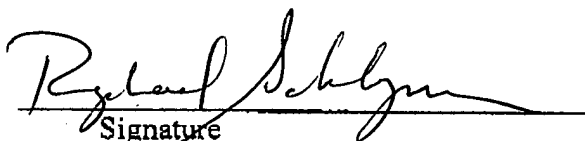
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CERTIFICATE OF MAILING

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P.O. Box 1450
Alexandria, VA 22313-1450

On 12/19/03
Date


Signature

RAPHAEL SCHLANGER
Typed or printed name of person signing Certificate

Express Mail Label ER321883168US

Docket No. 03-100
New Application:
Drawings: 22 sheets
Declaration: (1)
Check: \$627.00